PART B - FEE(S) TRANSMITTAL

	Complete and soud this form together with applicable			P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571) 273-2885				
in at IV	ISTRUCTIONS This for propriate. All further cordinated unless corrected and an annual control of the control of	rm should be used for tran respondence including the defined directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and ders and not) specifying	PUBLICATION FEE (if re- ification of maintenance fees a new correspondence addre	quired). Blocks I through 5 will be mailed to the curren ss; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
_	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any chan 29177 7590 11/25/2005			y change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	BELL, BOYD & P. O. BOX 1135 CHICAGO, IL 606	·			I hereby certify that States Postal Service addressed to the M transmitted to the U	Certificate of Mailing or Tran this Fee(s) Transmittal is bein e with sufficient postage for fi fail Stop ISSUE FEE address SPTO (571) 273-2885, on the	smission ag deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.	
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01 FC 02 FC		1400.00 OP 6.00 OP			February 2	24, 2006	(Signature) (Date)	
	APPLICATION NO.	FILING DATE	FIRST NAME		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
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L	APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional NO		\$1400		\$0	\$1400	02/27/2006	
	EXAMINER		ART UNIT		CLASS-SUBCLASS			
	BAYARD, EMMANUEL		2638		375-144000			
C	FR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	Correspondence or agents OR, alter (2) the name of a registered attorne of a Customer 2 registered patent		OR, alternatively, me of a single firm (having a attorney or agent) and the n	a single firm (having as a member a 2ey or agent) and the names of up to nt attorneys or agents. If no name is 3			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
							document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Siemens Aktiengesellschaft Muenchen, Germany								
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of the g							roup entity Government	
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.								
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							1.1	
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5.	Change in Entity Status (from status indicated above)							
La. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. Lb. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified about NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other interest as shown by the records of the United States Patent and Trademark Office.								
-	uthorized Signature			Date February 24, 2006				
	Typed or printed name Patricia Kane Schmidt				Registration No. 46,446			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								

Docket No. SMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) 0112740-198 (37 C.F.R. 1.311) Customer No. Group Art Unit Confirmation No. Examiner Application No. Filing Date 29177 2638 9385 **Emmanuel Bayard** December 3, 2001 09/830,624 METHOD FOR MEMORY ACCESS CONTROL IN RAKE RECEIVERS WITH EARLY-LATE Invention: TRACKING IN TELECOMMUNICATIONS SYSTEMS Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith are the following for the above-identified application. ☑ Issue Fee Transmittal Form PTOL-85 Plant Fee: Utility Fee: Design Fee: \$ 1400.00 □ Publication Fee: A check in the amount of \$1,406.00 is attached. The Director is hereby authorized to charge and credit Deposit Account No. 02-1818 as described below. Charge the amount of \boxtimes Credit any overpayment. Charge any additional fee required. ☐ Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. chnit Dated: February 24, 2006 Signature Patricia Kane Schmidt Reg. No. 46,446 Customer No. 29177 CC: Certificate of Transmission by Facsimile This certificate may only be used if paying Certificate of Mailing by First Class Mail by deposit account. I certify that this document and authorization to charge deposit I hereby certify that this correspondence is being deposited account is being facsimile transmitted to the United States with the United States Postal Service with sufficient postage as and Trademark Office (Fax No. first class mail in an envelope addressed to "Commissioner for on Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on February 24, 2006 (Date) (Date) of Person Mailing Signatus Signature Heather Eoster Typed or Printed Name of Person Mailing Correspondence Typed or Printed Name of Person Signing Certificate